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Sheila K. Mathews	(Depositor's name)
Mila T. Matheese	(Signature)
8/19/09	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/578,567	05/25/2000	Marilee G. Berry	99PS014/KE	6188
TITLE OF INVENTION: C	HANNEL IDENTIFICATION	ON FOR DIGITAL BROADCASTS IN PASSENGER ENTER	TAINMENT SYSTEMS	

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$0	\$0	\$1510	08/19/2009	
EXA	AINER	ART UNIT	CLASS-SUBCLASS				
PARRY, CHRISTOPHER L 2421		2421	725-076000	•			
CFR 1.363). Change of corres Address form PTO/S "Fee Address" in PTO/SB/47; Rev 03- Number is required 3. ASSIGNEE NAME /	AND RESIDENCE DAT alcss an assignee is iden th in 37 CFR 3.11. Com	ange of Correspondence "Indication form hed. Use of a Customer A TO BE PRINTED ON	or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patent atto listed, no name will be CHE PATENT (print or type data will appear on the part a substitute for filing an	3 registered patent attorn vely, as in membragent) and the names of uners or agents, If no namprinted.	p to p to se is 3dentified below, the doc		
Rockwe1	Collins, Inc.		Cedar Rapids	, IA			
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4a. The following fee(s)	are submitted:	41	 b. Payment of Fee(s): (Ples A check is enclosed. 	ise first reapply any prev	viously paid issue tee sn	own above)	
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Timed or printed our	me Daniel M Rac	hiari		Registration No. 46	5.218		

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319 295 3599 AUG-19-2009 ROCKWELL COLLINS LEGAL DE P. 03 16:08 Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 AUG 19 2009 Alexandria, Virginia 22313-1450 (571)-273-2885 or <u>Fax</u> INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. An further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless correspondence of the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address) 05/19/2009 7590 Certificate of Mailing or Transmission I hereby certify that this Fcc(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. Rockwell Collins Inc Attention Kyle Eppele 400 Collins Rd NE Cedar Rapids, 1A 52498 (Dopositor's name) Sheila K. Mathews 8/19/09 (Date) FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE 05/25/2000 99PS014/KE 6188 Marilee G. Berry TITLE OF INVENTION: CHANNEL IDENTIFICATION FOR DIGITAL BROADCASTS IN PASSENGER ENTERTAINMENT SYSTEMS TOTAL FRE(S) DUE DATE DUE PREV. PAID ISSUE FEE APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE NO \$1510 50 SO \$1510 08/19/2009 nonprovisional **EXAMINER** ART UNIT CLASS-SUBCLASS PARRY, CHRISTOPHER L 2421 725-076000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1,363). 2. For printing on the patent from page, list <u>| Daniel M. Barbier</u>i (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Rockwell Collins, Inc. Cadar Rapids, (A Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🚨 Government 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted: A check is enclosed. Issue Fee Payment by credit card. Form PTO-2038 is attached. Publication Fee (No small entity discount permitted) IX The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any Advance Order - # of Copies ... overpayment, to Deposit Account Number 18-1722 ____ (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the ussignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

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